

Together With



Winter 2009

A PUBLICATION OF THE TENNESSEE DEPARTMENT OF LABOR & WORKFORCE DEVELOPMENT

TOSHA and H1N1

The 2009 H1N1 influenza is transmitted via direct or indirect person-to-person spreading of infectious droplets passed when an influenza patient coughs, sneezes, talks or breathes. Transmission occurs when expelled infectious droplets or particles make direct or indirect contact with the mucus membranes of the mouth, nose or eyes of an uninfected person. OSHA has published, and TOSHA has adopted, a compliance directive to ensure uniform procedures when TOSHA conducts inspections to identify and minimize or eliminate high to very high risk occupational exposures to the 2009 H1N1 influenza Type A virus in healthcare or clinical laboratory settings. Inspections will be conducted in response to complaints and TOSHA inspectors will ensure that health care employers implement a hierarchy of controls, and encourage vaccination and other workpractices recommended by the CDC. Where respirators are required to be used, the OSHA Respiratory Protection Standard must be followed, including worker training and fit testing.



Lockout/Tagout Training

Most accidents involving hazardous energy release are caused by the following factors:

- Maintenance activities were initiated without attempting to deenergize the equipment or system, or control the hazards when energy is present
- Energy blockage or isolation was attempted, but was inadequate
- Residual (potential) energy was not dissipated
- Accidental activation of energy

These types of accidents are preventable if effective energy control techniques or procedures are available, workers are trained to use them, and management provides the motivation to ensure their use. The underlying cause of many accidents resulting in injury during maintenance is that work is performed without the knowledge that the system, energized or not, can produce hazardous energy.

Is training required annually? No

Does training require certification? Yes

Employer must certify that training or retraining took place and that the employee is kept up to date

What information must appear on the certificate? Each employee's name and the dates of training and/or retraining

Who must be retrained? All affected and authorized employees must be retrained under certain conditions listed below

What triggers the retraining requirements?

- A change in job assignments
- A change in machines, equipment, or processes that present a new hazard
- A change in the energy control procedures
- Periodic inspections reveal that there are deviations in the energy control procedure
- The employer believes that there are deviations from, or inadequacies in, the employee's knowledge or use of the energy control procedures

What is the object of the retraining?

- To introduce new or revised control methods and procedures as necessary
- To reestablish employee proficiency

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TOSHA and H1N1 (continued from page one)

The CDC recommends the use of respiratory protection that is at least as protective as a fit-tested disposable N95 respirator for health care personnel who are in close contact (within 6 feet) with patients who have suspected or confirmed 2009 H1N1 influenza.

These Type A viruses have a protein coating that surrounds them, called a capsid. The surface proteins making up the capsid in these virus strains are Hemagglutinin and Neuraminidase.

These surface proteins are the parts of a virus that can be changed when viruses mutate into new forms. This is how they change to be able to attack the cells of new hosts or in new ways in the same hosts. After mutation, they are no longer recognized as viruses that the immunological system of the host has fought before, and that allows them to evade the body's defenses. In the naming convention of viruses, the protein classifications become part of the name as in H1N1; H for the Hemagglutinin and N for the Neuraminidase. Hemagglutinin binds the virus to the cell it is infecting. Neuraminidase is an enzyme that lets the virus be

released from the host carrier cell.

To access a copy of the directive and the most current information relevant to all workplaces, go to www.osha.gov, click on "H" in the index, then "H1N1 Flu." You will find resources detailing the steps that managers, employers, and employees should take in responding to H1N1 flu.

TOSHA TIPS

Condition: An audiometric testing program was not established and maintained for an employee whose noise exposure equaled or exceeded an eight-hour time-weighted average (TWA) of 85 dBA (action level).

Potential Effects: Noise above the action level may cause temporary hearing threshold shifts. A hearing loss will interfere with communication and may result in increased stress and an increased accident rate. Chronic exposure to noise above the action level can result in permanent hearing loss.

Standard: 29 CFR 1910.95(g)(1)

Correction/Prevention: Establish an audiometric testing program that does the following:

- Provides annual audiograms at no cost to employees exposed above 85 decibels for eight hours. The audiograms must be performed by a competent person who is responsible to an audiologist, otolaryngologist or physician.
- Establishes a baseline audiogram within 6 months (12 months if using a mobile test van) of an employee working in an area with exposure greater than the action level.
- Evaluates audiograms with respect to the baseline audiogram for each tested employee, and determines whether a standard threshold shift has occurred.
- Notifies employees who have a verified standard threshold shift in writing within 21 days after verification. This employee must be retrained and refitted with, and required to wear, hearing protections that attenuates noise to below 85 decibels.



LEARN & LIVE

From the Public Sector Files



A 20-year-old employee of a city public works division drowned when he fell into rapidly running water following two days of excessive rainfall. The victim was checking two culverts which ran parallel to each other and which were apparently stopped up by debris, causing excessive amounts of water to overflow onto the nearby road. While attempting to determine the cause of the overflow and clear debris from the culvert, the victim fell into the rapidly running water and was sucked into one of the culverts. Despite the efforts of co-workers to hold onto him, the employee was pulled under and drowned. A good samaritan driving by stopped and tried to provide help. The good samaritan was also pulled into an adjacent culvert and also drowned.

To Prevent Such Incidents from Happening:

1. Instruct each employee in the recognition and avoidance of unsafe conditions and the regulations applicable to his work environment to control or eliminate any hazards or other exposure to illness or injury.
2. Provide employees working over or near water where the danger of drowning exists with U.S. Coast Guard approved life jackets or buoyant work vests.
3. Establish and maintain an occupational safety and health management system containing the following elements:
 - a. Management commitment and employee involvement
 - b. Worksite analysis
 - c. Hazard prevention and control
 - d. Safety and health training and education